

AMENDED IN SENATE JULY 2, 2009
AMENDED IN ASSEMBLY JUNE 1, 2009

CALIFORNIA LEGISLATURE—2009—10 REGULAR SESSION

ASSEMBLY BILL

No. 911

**Introduced by Assembly Member Lieu
(Coauthors: Assembly Members Eng and Price)**

February 26, 2009

An act to ~~add Section 1257.10 to~~ *add and repeal Section 1257.10 of the Health and Safety Code, relating to health facilities.*

LEGISLATIVE COUNSEL'S DIGEST

AB 911, as amended, Lieu. Emergency rooms: overcrowding.

Existing law establishes various programs for the prevention of disease and the promotion of health to be administered by the State Department of Public Health, including, but not limited to, the licensure and regulation of health facilities. Violation of these provisions is a crime.

This bill would require every licensed general acute care hospital with an emergency department to determine the range of overcrowding scores, as defined, that constitute each category of the overcrowding scale, as determined by the bill, for its emergency department. The bill would require every licensed general acute care hospital with an emergency department to calculate and record—~~a NEDOCS an overcrowding score, as defined,~~ every 4 hours, except as specified, to assess the crowding condition of its emergency department. The bill would require, by January 1, 2011, every licensed general acute care hospital with an emergency department to develop and implement a full-capacity protocol for each of the categories of the overcrowding scale.

This bill would require every licensed general acute care hospital *with an emergency department* to file its full-capacity protocol with the Office of Statewide Health Planning and Development, and to annually report revisions to its protocol.

The bill would repeal its provisions on January 1, 2014.

By changing the definition of an existing crime, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.

State-mandated local program: yes.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 1257.10 is added to the Health and Safety
- 2 Code, to read:
- 3 1257.10. (a) For purposes of this section, ~~a “NEDOCS an~~
- 4 ~~“overcrowding score”~~ means the score calculated using the
- 5 ~~equation derived from the National Emergency Department~~
- 6 ~~Overcrowding Study and is as follows: 85.8 (total number of~~
- 7 ~~patients within the emergency department/total number of staffed~~
- 8 ~~beds in the emergency department, not to exceed the number of~~
- 9 ~~licensed beds) + 600 (total number of admissions waiting in the~~
- 10 ~~emergency department/total number of inpatient hospital beds) +~~
- 11 ~~13.4 (total department, including patients awaiting transfer/total~~
- 12 ~~number of acute inpatient hospital beds routinely in use by the~~
- 13 ~~hospital, excluding beds in the newborn nursery, neonatal intensive~~
- 14 ~~care unit, and obstetrics) + 13.4 (total number of patients on~~
- 15 ~~respirators in the emergency department admitted to the intensive~~
- 16 ~~care unit) + .93 (the longest admit time, in hours, including~~
- 17 ~~transfers) + 5.64 (the wait time for the last patient called from~~
- 18 ~~triage waiting the longest in the waiting room, in hours) - 20.~~
- 19 (b) For purposes of this section the “overcrowding scale” means
- 20 ~~the range of NEDOCS~~ a range of overcrowding scores that are
- 21 divided into the following categories:
- 22 (1) Not busy, ~~which includes NEDOCS scores of 20 and below.~~
- 23 (2) Busy, ~~which includes NEDOCS scores of 21 to 60, inclusive.~~

(3) Extremely busy, ~~which includes NEDOCS scores of 61 to 100, inclusive.~~

(4) Overcrowded, ~~which includes NEDOCS scores of 101 to 140, inclusive.~~

(5) Severely overcrowded, ~~which includes NEDOCS scores of 141 to 180, inclusive.~~

(6) Dangerously overcrowded, ~~which includes NEDOCS scores over 180.~~

(c) Every licensed general acute care hospital with an emergency department shall determine the range of overcrowding scores that constitute each category of the overcrowding scale for its emergency department.

~~(e)~~

(d) Every licensed general acute care hospital with an emergency department shall calculate, and record, ~~a NEDOCS an overcrowding~~ score every four hours to assess the crowding condition of its emergency department.

~~(d)~~

(e) (1) If, after calculating and recording ~~a NEDOCS an overcrowding~~ score pursuant to subdivision ~~(e)~~ (d), a licensed general acute care hospital does not ~~record a NEDOCS have an overcrowding~~ score over 60 for the previous 30 days, it may calculate and record ~~a NEDOCS an overcrowding~~ score every eight hours rather than every four hours.

(2) If a licensed general acute care hospital calculating and recording ~~a NEDOCS an overcrowding~~ score every eight hours pursuant to this subdivision scores over 60, it shall again calculate and record ~~a NEDOCS an overcrowding~~ score every four hours pursuant to subdivision ~~(e)~~ (d).

~~(e)~~

(f) Every licensed general acute care hospital with an emergency department shall, by January 1, 2011, develop and implement, in consultation with its emergency department staff, a full-capacity protocol for each of the categories of the overcrowding scale that addresses all of the following *factors, except that if any of these factors do not occur at the hospital, the hospital may state in its protocol that the factor is not applicable:*

(1) Notification of hospital administrators, nursing staff, medical staff, and ancillary services of category changes on the overcrowding scale.

- 1 (2) Bed utilization.
- 2 (3) Diversion.
- 3 (4) Elective admissions.
- 4 (5) Transfers.
- 5 (6) Triage.
- 6 (7) Responsibilities of inpatient medical staff and specialty
- 7 service operations for rounds, discharges, coordination with the
- 8 emergency department, and emergency consults for emergency
- 9 department patients.
- 10 (8) Hospital unit operations.
- 11 (9) Nursing services.
- 12 (10) Supplies.
- 13 (11) Calling in additional medical, nursing, and ancillary staff.
- 14 (12) Space utilization, including, but not limited to, alternate
- 15 care sites.
- 16 ~~(f)~~
- 17 (g) Every licensed general acute care hospital shall file its
- 18 full-capacity protocol with the Office of Statewide Health Planning
- 19 and Development and shall annually report any revisions to its
- 20 protocol.
- 21 (h) *This section shall remain in effect only until January 1, 2014,*
- 22 *and as of that date is repealed, unless a later enacted statute, that*
- 23 *is enacted before January 1, 2014, deletes or extends that date.*
- 24 SEC. 2. No reimbursement is required by this act pursuant to
- 25 Section 6 of Article XIII B of the California Constitution because
- 26 the only costs that may be incurred by a local agency or school
- 27 district will be incurred because this act creates a new crime or
- 28 infraction, eliminates a crime or infraction, or changes the penalty
- 29 for a crime or infraction, within the meaning of Section 17556 of
- 30 the Government Code, or changes the definition of a crime within
- 31 the meaning of Section 6 of Article XIII B of the California
- 32 Constitution.